Travel & Expense Account Transmittal Sheet

After Approval, Mail Receipts To

CDPH, Accounting Section MS 1601, PO Box 997376 Sacramento, CA 95899-7376



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Employee Name **Expense Dates**

Total Expense Amount Amount Due Employee

Horton, Mark 10/06/09-10/06/09 474.20 169.00

Form ID

TEA000555402

DIRECTIONS FOR SUBMISSION

Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.

Date Expense Item 10/06

Taxi Fare

10/06 Taxi Fare Amount

If not submitted - Explain

75.00

70.00

Forwa

I have

Ref: TEA0005554